

Patent Application No.: 09/802,911
Attorney Docket No.: 58207.000004

1631
\$

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Eric B. ALLEN, et al.

Serial No.: 09/802,911

Filed: March 12, 2001

Art Unit: 1631

Examiner: Marjorie A. Moran

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For: SYSTEM AND METHOD FOR SIMULATING CELLULAR BIOCHEMICAL
PATHWAYS

TRANSMITTAL LETTER

Under Secretary of Commerce for Intellectual Property
and Director of the United States Patent and Trademark Office
Washington, D.C. 20231

Sir:

The following are enclosed for consideration in the above-identified application:

	FEE
<input type="checkbox"/> Response to Notice to File Missing Parts	\$
<input checked="" type="checkbox"/> Response to Office Action Restriction Requirement of August 16, 2002	\$
<input type="checkbox"/> Declaration: <input type="checkbox"/> Original; <input type="checkbox"/> Supplemental	\$
<input type="checkbox"/> Submission of Formal Drawings	\$
<input type="checkbox"/> Informal Drawings: ____ Sheets ____ Figures	\$
<input type="checkbox"/> Supplemental Information Disclosure Statement, Form PTO SB/08A, copy of International Search Report, and three (3) references	\$
<input type="checkbox"/> Amendment: <input type="checkbox"/> Preliminary; <input type="checkbox"/> § 116; <input type="checkbox"/> § 312; <input type="checkbox"/> Other	\$
<input checked="" type="checkbox"/> Request for Extension of Time <input type="checkbox"/> 3 month(s)	\$920.00
<input type="checkbox"/> Issue Fee: <input type="checkbox"/> Part B - Issue Fee Transmittal <input type="checkbox"/> Part C - Charge to Deposit Account	\$
<input type="checkbox"/> Notice of Appeal	\$
<input type="checkbox"/> Appeal Brief	\$
<input type="checkbox"/> Request for Oral Hearing	\$
<input type="checkbox"/> Reply Brief	\$
<input type="checkbox"/> Terminal Disclaimer	\$
<input type="checkbox"/> An additional claim fee is required, and is calculated as shown below	\$
TOTAL FEES BEING SUBMITTED	\$920.00


	Claims Remaining	Claims Paid For	Extra	Rate	Fee
Total Claims			0	x \$18.00	\$
Independent Claims			0	x \$80.00	\$
Multiple Dependent Claims (if applicable)				\$	\$
TOTAL EXCESS CLAIMS FEE					\$
SMALL ENTITY TOTAL (if applicable)					\$.00

The Commissioner is hereby authorized to charge payment of any additional filing fees required under 37 CFR § 1.16 and § 1.17 associated with this communication or credit any overpayment to the deposit account of Hunton & Williams, Deposit Account Number 50-0206.

Respectfully submitted,
HUNTON & WILLIAMS

Date: December 16, 2002

By:



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